

From: Judy Deutsch, for the League of Women Voters Health Care Working Team
Sent: Wednesday, August 30, 2006
To: AHRQ Citizenshealth
Subject: LWV Health Care Team response to Citizens' Health Care Working Group statement

Dear Members of the Citizens' Health Care Working Group:

We are a team of people from California, Connecticut, Colorado, Minnesota, New York, Massachusetts, Pennsylvania, and Washington State who thank you very much for the considerable work you have done to bring the views of everyday Americans to the job of creating a better health care system.

We agree with you that health and health care are fundamental to the well-being and security of the American people, that it should be public policy established in law that all Americans have affordable health care coverage, and that assuring health care is a shared responsibility.

However, we urge you to remember that more than 70% of the participants in your process favored guaranteeing that all Americans have health insurance as the top priority for public spending and that they favored the creation of a national health plan, financed by taxpayers, in which all Americans would get their health insurance as the best option to assure universal coverage.

Therefore, we recommend these additional points because they are essential to the health of the people in our nation:

1- It should be public policy that all residents have affordable, quality health care (if for no other reason than that the illness of non-citizens affect citizens both in their bodies and in their pocketbooks);

2-There should be a national health plan, financed by taxpayers, in which all residents of our nation would receive quality health care;

3-The quality health care to be provided should be defined by an independent body of consumers, providers, other technical experts, actuaries, and financing experts taking into account evidence-based science and medical effectiveness;

4-These benefits should cover the continuum of lifespan care — encompassing wellness, preventive services, primary care, acute care, mental care, dental care, prescription drugs, patient education, at home care for the elderly and disabled, hospice care and other end-of-life services — treatment and management of health problems in a full range of inpatient and outpatient settings;

5-For purposes of fiscal responsibility and quality of health care, there should be a great reduction of unnecessary care and administrative waste, an emphasis on integrated health care systems, health information and electronic medical record technologies, population-based preventive care and public health functions, and management of chronic diseases.

Also, we urge that you use the Institute of Medicine's recently set target date of 2010 as your target date for making health care available to everyone in our nation. We do not think our country needs or can afford to wait longer.

Sincerely,
Judy Deutsch,
for the League of Women Voters Health Care Working Team